UNITED STATES BANKRUPTCY COURT DISTRICT OF NEW JERSEY	Page 1 of 6		
Caption in Compliance with D.N.J. LBR 9004-1(b)			
In Re:	Case No.:		
in ke:	Chapter:		
	Judge:		
AMENDMENT TO SCHEDULE D, E/	F, F, G, H or LIS	ST OF CREDITOR	RS
Please specify the list or schedule(s) to be amended:			
☐ Schedule D – Creditors Who Hold Claims Secured	l by Property	☐ Schedule H –	Your Codebtors
☐ Schedule E/F – Creditors Who Have Unsecured Cl	laims	☐ List of Credito	ors (Matrix)
☐ Schedule G – Executory Contracts and Unexpired	Leases		
IMPODUANT. D D. N. I. I. D. 1007 1 .1	•		
IMPORTANT: Pursuant to D.N.J. LBR 1007-1, the mailin D, E, F, G or H is filed. Accordingly, there is a fee to amend nature of the amendment is to add or change the address of			
D, E, F, G or H is filed. Accordingly, there is a fee to amend	a previously listed c	amended as follows	
D, E, F, G or H is filed. Accordingly, there is a fee to amend nature of the amendment is to add or change the address of a The list or schedule(s) indicated above, having been processed in the control of the control	a previously listed c	amended as follows	
D, E, F, G or H is filed. Accordingly, there is a fee to amend nature of the amendment is to add or change the address of a state of the amendment is to add or change the address of the list or schedule(s) indicated above, having been producted the control of the amendment is to add or change the address of the address of the list or schedule(s) indicated above, having been producted and address of creditors being added, deleted or modificated above.	a previously listed of the control o	amended as follows	
D, E, F, G or H is filed. Accordingly, there is a fee to amend nature of the amendment is to add or change the address of the list or schedule(s) indicated above, having been processed.	reviously filed, is ed and indicate same;	amended as follows	

^{**} Debtors are advised that they must also file a Declaration (106Dec or 202) and an updated Summary of Assets and Liabilities (106Sum or 206Sum) when filing Amendments to Schedules A through J2.

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		1700.1111	eni Pauezoro		
Fill in this infor	mation to identify your	case:			
Debtor 1	Alicia Green				
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Bankruptcy Court for the:		DISTRICT OF NEW JEF	RSEY, TRENTON DIVISION		
Case number	17-28430				
(if known)					

Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

	r original forms, you must fill out a new Summary and check the box at the top of this page. t 1: Summarize Your Assets		
			assets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	163,446.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	5,999.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	169,445.00
Pa	t 2: Summarize Your Liabilities		
			liabilities unt you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column AAmount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	163,305.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e & chedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j &*Chedule E/F	\$_	11,900.52
	Your total liabilities	\$	175,205.52
Pa	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income(Official Form 106I) Copy your combined monthly income from line 12 oSchedule I	\$	3,649.97
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	2,841.00
Pa	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other.	ner sched	dules.
7.	Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a per purpose." 11 U.S.C. § 101(8). Fill out lines 8-9q for statistical purposes. 28 U.S.C.§ 159.	rsonal, f	amily, or household

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the

court with your other schedules.

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8. **From the** Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$_____3,931.12

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total clair	n
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	4,959.27
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	4,959.27

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	Case 17 20400 ON 6	Documer	t Page	1 of 6	10 10.10.00	DCSO Main
Fill in t	his information to identify your case:	DOCHHE	P AUL	4 ()I ()		
Debtor	1 Alicia Green					
DCDIO	First Name	Middle Name	Last Name		— }	
Debtor	2					
(Spouse	f, filing) First Name	Middle Name	Last Name			
United	States Bankruptcy Court for the: DIS	STRICT OF NEW JERSE	Y, TRENTON D	IVISION		
Case n	umber 17-28430					
(if known	11 20 100				■ c	heck if this is an
						mended filing
	al Form 106E/F dule E/F: Creditors Who	Have Unsecure	ed Claims			12/15
nny exec Schedul D: Credi he Cont	Implete and accurate as possible. Use Particutory contracts or unexpired leases that delete Executory Contracts and Unexpired Lators Who Have Claims Secured by Propert inuation Page to this page. If you have nomber (if known).	ould result in a claim. Als eases (Official Form 106G y. If more space is needed	o list executory c). Do not include a , copy the Part yo	ontracts on Schedul any creditors with pa u need, fill it out, nu	e A/B: Property (Officia rtially secured claims the mber the entries in the	I Form 106A/B) and on hat are listed in Schedule boxes on the left. Attach
Part 1:						
1. Do	any creditors have priority unsecured clair	ns against you?				
	No. Go to Part 2.					
	Yes.					
Part 2:						
3. Do	any creditors have nonpriority unsecured	claims against you?				
	No. You have nothing to report in this part. Su	bmit this form to the court w	rith your other sche	dules.		
	Yes.					
uns	all of your nonpriority unsecured claims is ecured claim, list the creditor separately for each one creditor holds a particular claim, list the	ach claim. For each claim lis	ted, identify what ty	pe of claim it is. Do n	ot list claims already inclu	uded in Part 1. If more
						Total claim
	Ocean County Board of Social					
4.1	Services	Last 4 digits of	account number	9975		\$4,255.25
	Nonpriority Creditor's Name	When was the d	obt incurred?			
	1027 Hooper Ave	When was the c	ebt incurreu :			
	Toms River, NJ 08753-8363					
	Number Street City State Zlp Code	As of the date y	ou file, the claim i	s: Check all that apply	/	
	Who incurred the debt? Check one.					
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	\square At least one of the debtors and another	<u></u> '	IORITY unsecured	d claim:		
	Check if this claim is for a community					
	debt Is the claim subject to offset?	Obligations a report as priority		ration agreement or d	ivorce that you did not	
	No	Debts to pens	sion or profit-sharin	g plans, and other sim	nilar debts	

Part 3: List Others to Be Notified About a Debt That You Already Listed

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Name and Address

☐ Yes

On which entry in Part 1 or Part 2 did you list the original creditor?

■ Other. Specify Overpayment of Food Stamps

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Debtor 1 Green, Alicia 17-28430

US Department of Treasury Bureau of the4 Fiscal Service PO Box 1686 Birmingham, AL 35201-1686

Line 4.13 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims

■ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number 9975

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				T	otal Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total claims					
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
				T	otal Claim
	6f.	Student loans	6f.	\$	0.00
Total claims from Part 2	6~	Obligations evicing out of a consection agreement or diverse that			
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	4,255.25
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	4,255.25

Fill in this in	nformation to identify your	case:					
Debtor 1	Alicia Green						
	First Name	Middle Name	Last Name		}		
Debtor 2 (Spouse if, filing	g) First Name	Middle Name	Last Name				
United State	es Bankruptcy Court for the:	DISTRICT OF NEW JE	RSEY, TRENTON DIVISIO	DN			
Case number	er 17-28430						
(if known)					Check if this is an amended filing		
	Form 106Dec						
Decla	ration About a	an Individual	Debtor's Sc	hedules	12/15		
You must file		le bankruptcy schedules n connection with a bankr	or amended schedules. N	laking a false stater	ment, concealing property, or), or imprisonment for up to 20		
	Sign Below						
Did yo	u pay or agree to pay some	one who is NOT an attorn	ney to help you fill out bar	nkruptcy forms?			
■ N	o						
☐ Ye	es. Name of person				Bankruptcy Petition Preparer's Notice, ation, and Signature (Official Form 119)		
	penalty of perjury, I declare by are true and correct.	that I have read the sumn	nary and schedules filed	with this declaration	າ and		
X lel	Alicia Green		Y				

Alicia Green Signature of Debtor 1

Date _April 30, 2018

Signature of Debtor 2

Date